

## **SECURITY THREAT GROUP MEMBER SELF ADMISSION FORM**

l,	, at	Correctional Facility
(Inmate - Print Name & DOB)	, at (Name of Facility)	
certify that I am a member/leader of the	(Name of Group)	group.
(Circle One)	(Name of Group)	
Local Set/Chapter:	Location Where I Joined:	
My Rank:		
Inmate Signature:	Date:	
	WRITE BELOW THIS LINE FACILITY USE ONLY	
Staff Member to Whom the Admission Was	Made:	
Date of Admission:	Time:	-
Location Where the Admission Was Made: _		
Circumstances Under Which the Admission V	Vas Made:	
Inmate's STG-Related Tattoos (specify if tatto	oos are specific to an STG other tha	n the one declared):
Street Set:		
Staff Member Signature:	D	ate:
Witnessing Staff Member Name:		
Witnessing Staff Signature:	Da	ate: